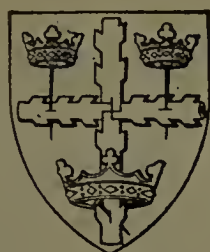


BOROUGH OF



COLCHESTER

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

JOHN D. KERSHAW

M.D., B.S., London ; M.R.C.S., England :

L.R.C.P., London, D.P.H.

MEDICAL OFFICER OF HEALTH

PORT MEDICAL OFFICER

DIVISIONAL SCHOOL MEDICAL OFFICER

AREA MEDICAL OFFICER

CONSULTANT IN INFECTIOUS DISEASES

MYLAND HOSPITAL, COLCHESTER

1961

BOROUGH OF



COLCHESTER

BOROUGH AND PORT HEALTH COMMITTEE, 1961

THE RIGHT WORSHIPFUL THE MAYOR
COUNCILLOR BRIGADIER D. F. PANTON, C.B.E.

Chairman :

COUNCILLOR I. T. BROWN

Deputy-Chairman :

COUNCILLOR BRIGADIER D. F. PANTON, C.B.E.

Members :

ALDERMAN MISS K. E. SANDERS, A.R.R.C., J.P.

ALDERMAN C. E. CHILD

COUNCILLOR C. W. PELL

ALDERMAN W. C. LEE

COUNCILLOR W. E. SANDFORD

COUNCILLOR MRS. A. M. SMITH

THE HEALTH DEPARTMENT, 1961

PART-TIME STAFF

Medical Officer of Health, etc. :

JOHN D. KERSHAW, M.D., B.S.(LOND.), D.P.H.

Assistant Medical Officers :

R. E. BARRETT, M.B., B.S., D.T.M.&H., D.P.H. (LOND).

ELEANOR M. SINGER, M.SC., M.R.C.S., L.R.C.P., D.C.H.
(to 30.6.61)

ANN B. CLARK, M.R.C.S., L.R.C.P. (from 1.7.61)

Public Analyst :

J. E. WOODHEAD, B.SC., F.I.C., PH.C.

WHOLE-TIME STAFF

Senior Public Health Inspector :

†* L. H. ENGLAND

Deputy Senior Public Health Inspector :

†* O. R. WARNER

Additional Public Health Inspectors:

†* C. J. JACOBI

† E. R. SWIFT

†* P. CUTTS

† R. G. MORLEY (to 30.4.61)

† W. G. THOMAS (from 23.5.61)

† Public Health Inspector's Certificate.

* Meat Inspector's Certificate.

Clerk-trainee Inspector :

M. J. KING

Clerks :

R. D. SARGEANT, A.C.C.S.

L. G. NICHOLLS

R. A. WILLSMORE (to 30.11.61)

Disinfector :

A. E. CUDMORE

Rodent Operator :

W. I. HAWKINS

Telephone No.
Colchester 5101, Extns. 8 and 73
(Night line 73107)
Health Delegated Services
Colchester 6251

HEALTH DEPARTMENT,
TRINITY STREET,
COLCHESTER.
30th October, 1962.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my Annual Report for the year 1961.

Vital Statistics

The total number of live births, 1,151, is the highest ever recorded in the Borough, though because of the increase in population during the past 15 years the birth rate is not a record. Nevertheless, at 18.02 it is higher than for some years and also higher than the national average. The infant mortality rate is lower than in 1959 and 1960 and also lower than the national average; though it is still above the phenomenal low record figure of 14.9 (in 1957) it can be regarded as satisfactory in its indication that medical services for young children are doing an effective job. The general death rate, at 10.98, is below the national average and in the range which seems at present to be standard for the area. To complete the picture, it is encouraging to note that we have now completed five consecutive years without a maternal death in the town.

Infectious Diseases

For the tenth consecutive year there was no case of diphtheria in the Borough. Whooping-cough and scarlet fever, both unusually prevalent in 1960, ran their epidemic course and declined, the former from 198 cases to 20 and the latter from 108 to 24. On the other hand the measles epidemic which started in the last weeks of 1960 came to its peak in the spring of 1961 and 810 cases in all were notified during the year. Fortunately most of the cases were mild and uncomplicated and only 9 required admission to hospital. Poliomyelitis was once again absent from the town.

Causes of Death

The most substantial change in the table of causes of death is the increase in the number of deaths ascribed to coronary disease and angina. For some years this has been fluctuating between 100 and 125, but in 1961 it reached 151 as compared with 113 in 1960. Even if we allow for differences in diagnosis and take all types of heart disease together, the total is 258 as compared with 223. I am always chary of drawing conclusions from figures for a single year but it would certainly seem that Colchester is sharing in the general national increase in mortality from this type of disease. Lung cancer deaths are slightly up on 1960.

The table of deaths of Colchester residents over 70 years of age bears out the experience of previous years in suggesting that more people can expect to live longer than is the case in most places.

Care of the Elderly

The chiropody service, which I mentioned last year as an important provision for old people, has continued through the year, though it is still short of the ideal and cannot develop until the staffing position is more satisfactory. Too many of those who need it cannot easily make the journey to a central clinic and to give them service in their own homes, though the logical way of helping, is expensive in chiropodists' time.

The meals on wheels service has been an undoubted success. It continues to make use mainly of voluntary agencies and, indeed, it is hard to see how it could operate otherwise, since it demands the concentration of a large number of workers during a comparatively short period at the end of the morning and the beginning of the afternoon. Since the people who need the service are scattered all over the town, the provision of meals from a central kitchen posed almost insuperable problems of transport, and it was decided to begin on a "district" basis. Messrs. Paxman's undertook to make meals available from the canteen at cost price and these were delivered over the eastern part of the town, Hythe Hill, Old Heath and East Gates area. In this way 72 meals could be provided twice a week. During 1962 Messrs. Woods have offered the help of their canteen and before the end of the year a further 48 meals twice weekly will be provided in the northern area. It is intended that further districts shall be added as the scheme proceeds. Transport was initially on a voluntary basis, but the service has now bought a van (from voluntary contributions) which is a substantial help. At present the Corporation subsidises the scheme at the rate of 1s. 3d. per meal, the old people who receive the food paying 1s.

I regard this work as an outstanding example of what voluntary workers can do to supplement the provisions of the Welfare State. The Women's Voluntary Service stands at the heart of the scheme, with notable help and support from the Inner Wheel, the Mile End Townswomen's Guild, the Women's Institute and the Soroptimists' Club. Mere males, however, are not forgotten; Rotary has also taken a positive interest! We have excellent liaison between these bodies and the staff of the health department, who are able to give the special practical guidance which ensures that voluntary and statutory efforts interlock without wasteful overlapping. Voluntary work has sometimes been criticised in the past on the grounds that it attracts too many people who seek the limelight; the meals on wheels service cannot be open to this charge. Those who take part in it know that it stands or falls by its "unglamorous" aspects and we have never yet been short of volunteers for meal-serving and washing-up; all honour to the ladies who take a pride in this true and humble service for the unfortunate.

I wish we could report equal progress in the provision of a foul laundry service for the incontinent elderly, but though the goodwill

is there certain practical difficulties remain to be overcome. Some time was spent in argument as to whether the County Council or the Borough Council was the appropriate body to take the responsibility, till eventually it was ruled that the Borough should be responsible. Severalls Hospital offered to carry out the actual laundering, at a bare cost figure, but it was impossible to deal with details until the laundry reorganisation plan had been completed and at the time of writing this report we have not yet been able to decide the important issue of what preparatory treatment, if any, the soiled articles should have before delivery to the laundry. I am hopeful that the outstanding matters, including that of transport, will be settled by the end of 1962 and that the scheme will become a reality early in 1963.

Housing

The number of applications for acceleration of re-housing or housing transfers on health grounds seems to have been diminishing somewhat, though the Council's housing lists do not show any very marked improvement in the situation. It may be that there is in fact a decrease in the number of those who are suffering in health from bad housing conditions but I am inclined to feel that the principal change has been in a more realistic approach to the issue of medical certificates. It is often difficult to prove that illness is actually being caused by bad housing. There is no doubt that overcrowding and unsuitable or cramped accommodation make life more difficult for people who are ill and produce stress and strain which will in the long run tend to exacerbate the illness, but much depends on personal factors.

The long waiting list for special accommodation for the elderly is the most distressing part of the present picture. Too often ageing people who still value their independence and are reluctant to admit that the disabilities of age are catching up with them delay application for council flats or bungalows until they are already in difficulties. By the time they have waited their turn they may have come to a state in which they cannot easily maintain their independence even in their new accommodation. It is not that their old houses are unfit for habitation but rather that they are too large or inconvenient or lack baths and indoor sanitation; younger people can manage the household chores and accept the discomforts but for the elderly these may be the last straws that break the proverbial camel's back. When old people leave such a house for a council bungalow they leave vacant a house which could accommodate a needy family with children, so that if one looks at the matter overall a "housing unit" is added to the total pool, but the vacated house is, of course, thrown on to the open market and is taken by the tenant who can pay the highest rent rather than by the tenant who is in greatest need. This is, in fact, part of the phenomenon which can be seen all over the country at the present time—that the operation of a "free market" and "normal price mechanism" in housing is not improving the position of the poorer sections of the population.

Less than many other places, but still to a degree which cannot be ignored, Colchester has been having trouble with what are now officially known as "houses in multiple occupation". Sundry people in search of quick profits have been buying up large old properties, installing a few pieces of second-hand furniture, and letting out furnished accommodation to families which cannot find anything better. A few of these places have been dilapidated enough to warrant the health department's seeking closure or demolition orders, but others are structurally in fair condition and cannot be dealt with in this way. In them live families with young children—the landlords of better properties tend to let to childless couples, for reasons which need not be laboured—crowded for living space and sharing kitchen, W.C. and washing facilities. Expenditure on maintenance and repair is kept down to a minimum and cleaning and upkeep of the landings, stairs, kitchens and other places common to tenants, being "everybody's business" is looked after by no-one. Were these common lodging houses we could compel the owner to run them properly, but they are not. We might, it is true, compel him to relieve overcrowding by evicting some of the tenants, but for the wretched tenants themselves even comparative squalor in a place like this is better than nothing.

These people can at least get on to the Council's housing list. There are some occupiers of "self-contained accommodation" who do not qualify for the current list but who are little better off than the "sharers". Old houses are being converted into flats, with varying convenience and facilities, furnished sometimes to a very low standard, and let at rents which may or may not bear a reasonable relation to what the tenant gets for his money. Some are good, some tolerable and some quite appalling; in the last group one can find grimy basements with outside sanitation and the dimmest of daylight or so-called bedrooms without windows ventilated only by an air-brick or a few holes drilled in a boarded partition. Not all these, by the way, are in the town's poorer quarters. This kind of thing is creeping into the best residential neighbourhoods. Knowing that they must either pay up and keep quiet or else get out, the tenants pay more per week than a council house at an economic rent would cost them and have little chance of saving up with the ultimate hope of buying a house.

New legislation introduced in 1962 promises to give us some powers to deal with houses in multiple occupation, but at the moment we are enjoined by the Ministry of Housing rather to explore the situation than to take any immediate action. I hope that when the exploration is completed we shall be given the chance to take some really effective action. It is far from pleasant to have to sit back and watch new slums being created almost faster than we can clear the old ones.

Food Hygiene

In the last two or three years my colleagues and I have been rather disturbed by what seems to be an increase in cases of carelessness in food handling and selling. They may occur in large shops

or in small and it is often extremely difficult to decide who is in fault, so that we cannot take such vigorous action as we should like. For example, a local shop sells a sealed package of cakes supplied by a wholesaler elsewhere and the purchaser comes to us saying that when he or she opened the package some of the cakes were mouldy. Has the mould grown while the cakes have been standing for a couple of days in the purchaser's larder, while they were in the local shop or before they reached Colchester? Should the shop-keeper have noticed the defect or was the packing such that the cakes could not be seen? How long had the cakes been in stock locally?—manufacturers' date codes on packets are not always easy to interpret and the shopkeeper's story may differ from that of the wholesaler. In any case, how long is it "safe" to keep a package on the shelves, remembering that much depends on store-room conditions?

There are several possible explanations of the position. One may well be that in these days of full employment in industry jobs as shop assistants are less attractive than they used to be so that not all shop assistants are as keen and careful as one would like. The relative disappearance of "home-made" local foodstuffs in favour of large-scale wholesale commodities—as in the example above—increases the risk of foods being stale or defective when they are consumed. It must be remembered that in this world one rarely gets something for nothing and that when foods or any other commodities are sold at cut prices someone may have cut down either quality or service. In 1960 we had an instance in which, following a customer's complaint, we found a number of defective cans of stewed steak in a local shop and discovered that they were part of a consignment which had spent some time at the bottom of the sea in a sunken vessel! They had been salvaged, bought very cheaply by a large firm, cleaned of rust, fitted with attractive new labels and put on sale. Nothing had been done which was contrary to the law and no individual could be legally blamed. Our protests led to the withdrawal of the rest of the stock but the Health Committee felt that such risky food should never have been on the market at all, a feeling with which the public will doubtless agree. The price of freedom from food-borne illness, like the price of other freedoms, is still eternal vigilance.

General

Once again I would like to thank my colleagues in this and other departments, many people in various walks of life outside the local authority service and last, but by no means least, the members of the Borough and Port Health Committee for all they have done to make my task as M.O.H. not merely easy but pleasant.

I remain, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

JOHN D. KERSHAW,

Medical Officer of Health, etc.

Report of the Medical Officer of Health for the year 1961

A Report as directed by Circular 1/62 of the Ministry of Health

STATISTICAL SUMMARY

Population (R.G. Estimate) with Military (at 30/6/61)	64,520
(Census 1961, 65,072)	
Area	12,037 acres
Number of inhabited houses (Census 1951) ..	15,069
Number of inhabited caravans (Census 1951) ..	69
Rateable Value (1/4/61)	£885,487
Product of a penny rate	£3,621 15s. 1d.
Birth Rate (1,084 legitimate births, 67 illegitimate)	
(Corrected)	18·02
(Crude)	17·84
„ „ England and Wales	17·4
Stillbirths (18) Rate per thousand live and stillbirths	15·4
England and Wales	18·7
Infantile mortality rate per 1,000 related live births—	
Legitimate (20 deaths), 17·4. Illegitimate (no deaths), 0·0. Total (20 deaths)	17·4
Infantile Mortality Rate , England and Wales ..	21·4
Neonatal Death Rate (15 deaths)	13·0
Neonatal Death Rate , England and Wales ..	15·5
Death Rate per 1,000 of the population (Corrected)	10·98
(Crude)	12·34
„ „ England and Wales	12·0
Percentage of total deaths occurring in Public Institutions	62·0
Women dying in, or in consequence of, childbirth	Nil
Pulmonary Tuberculosis Death Rate	0·06
Other Tuberculosis Diseases Death Rate	0·00
Cancer Death Rate	2·3

DEATHS OF CIVILIAN RESIDENTS, 1961

<i>Cause of Death.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Respiratory Tuberculosis	3	1	4
Syphilitic Disease	2	—	2
Other Infections	1	2	3
Cancer, Stomach	17	5	22
„ Lung, Bronchus	22	4	26
„ Breast	—	19	19
„ Uterus	—	1	1
„ Other sites	37	40	77
Leukæmia	2	3	5
Diabetes	2	7	9
Vascular Lesions, Nervous System ..	29	73	102
Coronary Disease, Angina	97	54	151
Hypertension with Heart Disease.. ..	5	9	14
Other Heart Disease	33	60	93
Other Circulatory Disease	14	27	41
Influenza	4	7	11
Pneumonia	23	26	49
Bronchitis	30	15	45
Other Respiratory Diseases	7	2	9
Ulcer of Stomach and Duodenum	2	1	3
Gastritis, Enteritis and Diarrhœa	1	1	2
Nephritis and Nephrosis	2	4	6
Hyperplasia of Prostate	4	—	4
Congenital Malformations	2	4	6
Other defined diseases	27	48	75
Motor Vehicle Accidents	7	2	9
All other Accidents.. .. .	10	4	14
Suicide	1	2	3
Homicide, etc.	2	1	3
	386	422	808

1961. DEATHS OF COLCHESTER RESIDENTS OVER 70 YEARS OF AGE

	Aged 70 and under 80	Aged 80 and under 90	Aged 90 and over	Total
Male	120	80	11	211
Female	123	127	41	291
Total	243	207	52	502

Thirteen persons were aged 90, twelve aged 91, five aged 92, five aged 93, eight aged 94, five aged 95, one aged 96, two aged 97, and one aged 98. The oldest person was a female.

LABORATORY, 1961

Specimen and Examination.	Positive.	Negative.	Total.
Urine, abnormalities	10	390	400
Blood, anthrax	—	1	1

Four articles of food were examined for presence of foreign bodies.

In addition 63 samples of water were bacteriologically examined.

	<i>Samples</i>	<i>Satisfactory</i>	<i>Unsatisfactory</i>
Town Water Supply ..	36	36	Nil
Well Water Supply ..	5	4	1
Swimming Pool Water ..	2	2	Nil
Tidal River Water ..	20	Nil	20

Two samples of well water were submitted to the County's Public Health Laboratory for chemical analysis. The result of one was regarded as showing an inferior condition for a well water. The other was considered satisfactory, although unsuitable for preparation of infant feeds by reason of high nitrate content.

Samples were taken about 150 yards below sewer outfall on both rising and falling tides with a view to ascertaining the state of the river into which the sewage effluent was flowing.

The flow in of sea water was generally rather more pure than the flow out of the mixture of fresh and salt water but all samples yielded high counts of organisms and the presence of coliform bacilli.

New offices have been opened at the Haven Road Sewage Treatment plant and staff moved in on 1st January, 1962 to deal with extensions and improvements.

Examinations by the Public Health Laboratory Service (Ipswich) numbered 9 Bacteriological (6 satisfactory, 1 fairly satisfactory and 2 unsatisfactory).

NURSING HOMES

General and surgical beds available are 14.

There are two Homes registered in the Borough.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

Notifiable Diseases (other than Tuberculosis) during the
Year 1961

(Civilian and Military Cases)

Disease	Total Cases Notified	Total Cases in Age Groups											Cases admitted to Hospital	
		Under 1 Year	1	2	3	4	5-9	10-14	15-19	20-34	35-44	45-64		65 and Over
Measles	810	36	94	128	116	105	309	15	5	1	1	—	—	9
Food Poisoning	2	—	—	—	—	—	—	—	—	—	—	2	—	—
Malaria	1	—	—	—	—	—	—	—	—	1	—	—	—	1
Pneumonia ..	19	—	—	—	—	—	2	—	—	—	2	9	6	1
Dysentery ..	2	1	—	—	—	—	—	1	—	—	—	—	—	—
Erysipelas	8	—	—	—	—	—	—	—	—	8	—	—	—	—
Rabies	2	—	—	—	—	—	—	—	—	—	—	1	1	—
Scarlet Fever ..	24	—	—	1	2	18	2	—	—	—	1	—	—	—
Infectious Hepatitis ..	15	—	—	—	—	—	1	6	2	4	2	—	—	3
Suspected Food Poisoning ..	2	—	—	—	—	—	—	—	—	1	1	—	—	—
Whooping Cough ..	20	2	3	3	1	5	6	—	—	—	—	—	—	2
Acute Encephalitis	1	1	—	—	—	—	—	—	—	—	—	—	—	1
Totals ..	906	40	97	132	119	128	320	22	7	15	7	12	7	17

Deaths from notified diseases: Pneumonia 3. Acute Encephalitis 1.

Deaths from unnotified diseases: Pneumonia 29. Infective Hepatitis 1.

Total deaths from infectious diseases: 34.

Percentage of cases treated in Hospital: 1.9 per cent.

During the year 49 cases of various diseases and illnesses were treated in the Isolation Hospital from the Borough of Colchester, as can be seen from the table given below:

Measles	9
Whooping Cough	2
Pneumonia	1
Pyrexia unknown origin	2
Gastro-enteritis	5
Upper Respiratory Infection	2
Bronchitis	1
Herpes Zoster	1
Tonsilitis	2
Parotid Abscess	1
Mumps	3
Psychological illness	1
Meningitis	2
Influenza	1
Colitis and Ketosis	1
Observation	2
Chicken Pox	5
Salmonella Infection	3
Infective Hepatitis	3
Undiagnosed	2

All of these cases recovered.

Tuberculosis

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1	..	..	..	..	..	..	..	..
1	..	..	..	..	..	..	..	..
2-4	..	2	..	..	..	..	..	..
5-9	..	..	..	..	..	..	..	..
10-14.. .. .	..	1	..	..	..	..	..	..
15-19.. .. .	..	..	..	1	..	..	..	..
20-24.. .. .	..	1	..	..	..	..	..	..
25-34.. .. .	..	1	..	..	..	..	..	..
35-44.. .. .	3	1	..	..	..	1	..	..
45-54.. .. .	1	2	..	..	..	..	..	..
55-64.. .. .	2	..	..	..	3	..	..	..
65 and upwards	..	..	..	..	..	..	..	..
Totals	6	8	..	1	3	1	..	..

Cases of Tuberculosis dying unnotified—1.

Tuberculosis Register

	1958	1959	1960	1961
Pulmonary Cases	317	331	332	326
Other Forms of Tuberculosis	33	32	33	27

*Prevention and Treatment of Tuberculosis.
Section 172, Public Health Act, 1936.*

Prevention and Treatment of Blindness.

Section 176, Public Health Act, 1936.

No action was required under the above powers.

National Assistance Act, 1948.

Section 47.

One case was investigated for possible action under the provisions of the above Act, but the powers were not invoked as consent was obtained to Institutional admission.

He was an elderly man living in a Council house who fell into arrears of rent. His son gave him some attention but was often away from home as a long distance lorry driver. He was admitted to residential accommodation at St. Albright's Hospital.

CREMATIONS, 1961

<i>Died in Month</i>	<i>Total</i>	<i>Resi- dents</i>	<i>Non- Resi- dents</i>	<i>Form F Signed by</i>			
				<i>Dr. Kershaw</i>	<i>Dr. Singer</i>	<i>Dr. Alderton</i>	<i>Dr. Barrett</i>
January ..	101	27	74	91	10	—	—
February ..	129	26	103	122	7	—	—
March ..	108	27	81	92	16	—	—
April ..	85	28	57	43	25	1	16
May ..	80	16	64	64	—	—	16
June ..	88	15	73	18	3	1	66
July ..	65	17	48	43	—	—	22
August ..	64	12	52	61	—	—	3
September	63	14	49	43	—	—	20
October ..	80	20	60	69	—	—	11
November..	79	15	64	72	—	—	7
December ..	107	31	76	94	—	—	13
Totals ..	1049	248	801	812	61	2	174

Essex 996, Suffolk 29, London 7, Other Areas 17—Total 1,049.

Coroner's Cases:	January 14	April 12	July 8	October 11
144	February 24	May 8	August 6	November 10
	March 17	June 9	September 9	December 16

Essex County Council Act, 1933.

Seven establishments are registered under the above Act for massage or special treatment.

PET ANIMALS ACT, 1951

Six sets of premises were registered during the year.

HOUSING APPLICATIONS, 1961

Number of applications accepted for re-housing supported by medical certificates	114
Number of such cases re-housed during year	127

MEDICAL EXAMINATIONS OF BOROUGH AND WATER BOARD EMPLOYEES FOR SUPERANNUATION OR FOR ROAD TRAFFIC ACT PURPOSES DURING 1961

Primary Examinations	128 passed, 4 failed
Examinations after absences ..	4
Examinations for other authorities ..	2

SANITARY CIRCUMSTANCES OF THE AREA

One cesspool was done away with by the Borough Engineer's Department during the year.

Water.

On the 1st April, 1961, the Borough of Colchester water undertaking, together with those of the Lexden and Winstree Rural District Council and the West Mersea Urban District Council, came under the control of the newly constituted Colchester and District Water Board. As a result of this amalgamation, the unified water authority now serves an area of 120 square miles, with a population of approximately 90,000, of whom over 99 per cent. receive a piped water supply.

Since the takeover an investigation has been made into the presence of coliform organisms in samples (before chlorination) from the Lexden Springs, and the trouble is thought to have been due to the overflowing of one of the Corporation's sewers in the Halstead Road which occurs only after thunder storms. Steps have been taken by the Board to experiment further in an effort to ascertain if this supposition is indeed correct and in the meanwhile the Borough Engineer has arranged for the stoppage of the suspected overflows.

Main Drainage and Sewage Treatment.

Only minor drainage works were carried out during the year.

Refuse Collection and Disposal.

The new refuse tip at Shrub End came into operation in September, 1961 and Stanway refuse tip was closed down. A new administration block permits salvage work at the new site.

Swimming Baths.

There are three swimming baths in the Borough. Two of these are open-air and one indoor heated. (See Report for 1959 for full details which remain unaltered.)

SANITARY INSPECTION

General Summary of Work carried out by Public Health Inspector's Department under Public Health Acts, Housing Acts, By-laws, etc.

Defects found	2,513
Defects remedied	2,058
Factories and Workshops inspected	429

Housing.

Sinks, Waste Pipes, etc., provided or renewed ..	13
Floors or walls or ceilings repaired	209
Doors or windows provided or repaired	239
Ovens or firegrates repaired or renewed	17
Stairs repaired	16
Rooms cleansed	134
Roofs repaired (including rain-pipes and gutters) ..	137
Chimneys repaired or renewed	33
Damp houses remedied	53
Yards paved or repaired	10
Other housing repairs	30

Drainage.

Repairs and improvements	281
Water Closets provided or repaired	98
Cesspools : abolished (-), provided (-), repaired (-) ..	—

Other Sanitary Work.

Under Shops Act	5
Under Factories Act	58
Under Food and Drugs Act	271
Houses disinfected	8
Clothing and other articles disinfected	1,228
Mains supply provided to existing houses	3
Well water sampled	11
Dustbins provided	8
Re-visits in connection with Sanitary Notices	4,460
Offensive accumulations removed	2
Pig keeping nuisances abated	2
Matters referred to other Departments	202
Other nuisances or matters attended to	25

FACTORIES ACT, 1937

Prescribed particulars on the administration of the Factories Act, 1937.

PART I OF THE ACT

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	40	23	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	389	406	10	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total ..	429	429	11	—

2.—**CASES IN WHICH DEFECTS WERE FOUND**

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ..	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ..	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient	—	1	—	—	—
(b) unsuitable or defective ..	28	32	—	3	—
(c) not separate for sexes ..	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
Total ..	28	33	—	3	—

PART VIII OF THE ACT

OUTWORK

(Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of outworkers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome places	Notices served	Prosecutions
Wearing } Making, etc. ..	52	—	—	—	—	—
apparel } Cleaning and washing ..	—	—	—	—	—	—
Household linen	1	—	—	—	—	—
Lace, lace curtains and nets ..	—	—	—	—	—	—
Curtains and furniture hangings ..	8	—	—	—	—	—
Furniture and upholstery	2	—	—	—	—	—
Electro-plate	—	—	—	—	—	—
File making	—	—	—	—	—	—
Brass and brass articles	—	—	—	—	—	—
Fur pulling	—	—	—	—	—	—
Iron and steel cables and chains ..	—	—	—	—	—	—
Iron and steel anchors and grapnels	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—
Locks, latches and keys	—	—	—	—	—	—
Umbrellas, etc.	—	—	—	—	—	—
Artificial flowers	—	—	—	—	—	—
Nets, other than wire nets	—	—	—	—	—	—
Tents	—	—	—	—	—	—
Sacks	—	—	—	—	—	—
Racquet and tennis balls	—	—	—	—	—	—
Paper bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
Brush making	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosaques, Christmas crackers, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—
Lampshades	—	—	—	—	—	—
Total ..	63	—	—	—	—	—

OFFENSIVE TRADES AND KNACKER'S YARD

	Number.	Inspections.
Gut Scraper	1	7
Tallow Melter	1	2
Rag, Bone and Skin Dealer	5	5
Bone Boiler	1	2
Tripe Boiler	1	27
Total	9	43
Horse Slaughterer	1	7

These occupations have been carried out satisfactorily and no complaints have been received during the year.

COMMON LODGING HOUSE

There is one Common Lodging House in the Borough, providing accommodation for 27 lodgers. Inspections have been made on various occasions and cleansing and maintenance have been attended to satisfactorily.

ERADICATION OF BED BUGS

Dwelling Houses Infested—Council 1, Others 3	4
Dwelling Houses Disinfested—Council 1, Others 3	4
Rooms in these—Infested and Disinfested	14

In addition sixteen dwelling houses, including two Council houses were treated for the eradication of fleas.

Disinfestation of dwelling houses is carried out free of charge.

RATS AND MICE

During the year 2,458 inspections and re-inspections were made by the Rodent Operators.

Five hundred and twenty-five complaints of rat infestation were received and dealt with and altogether some 601 premises were cleared during the year.

The public sewers were treated twice during the year and poison laid in those manholes where takes of pre-bait had been recorded. Fifty-eight manholes were poison baited as a result of the first treatment and seventy-three manholes as a result of the second treatment.

WASPS' NESTS

One hundred and ninety-one wasps' nests were destroyed during the year.

HOUSING

Statistics for the Year 1961.

New Houses completed—525.

New Flats completed—55.

Additional units of accommodation provided by conversions	5
---	---

I.—*Inspection.*

Number of dwelling houses inspected	831
---	-----

Number of dwelling houses found to be unfit for human habitation	31
--	----

Number of dwelling houses found not to be in all respects reasonably fit for human habitation ..	429
--	-----

II.—Number of defective houses rendered fit by Informal Action	415
--	-----

III.—*Action under Statutory Powers.*

A. Under Sects. 9 and 10, Housing Act, 1957—

Number of dwelling houses in respect of which notices were served for repairs	—
---	---

Number rendered fit—

(a) By owners	—
-----------------------	---

(b) By Local Authority in default	—
---	---

B. Under Public Health Acts—

Number of dwelling houses in respect of which notices were served for repairs	26
---	----

Number complied with—

(a) By owners	25
-----------------------	----

(b) By Local Authority in default	—
---	---

C. Proceedings under Sections 16 and 17 of the Housing Act, 1957—

(1) Number of Closing Orders made including undertakings not to re-let given by owners ..	12
(2) Number of dwelling houses in respect of which Demolition Orders were made	22
(3) Number of dwelling houses demolished in pursuance of Demolition Orders	11

D. Proceedings under Section 18 of the Housing Act, 1957 —

Houses on which Closing Orders were in force and subsequently demolished by the owners ..	2
---	---

RENT ACT, 1957

Part I—Applications for Certificates of Disrepair.

Number of applications for certificates	6
Number of decisions not to issue certificates	1
Number of decisions to issue certificates	5
(a) in respect of some but not all defects	5
(b) in respect of all defects	Nil
Number of undertakings given by landlords under paragraph 5 of the First Schedule	4
Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	Nil
Number of Certificates issued	1

Part II—Applications for Cancellation of Certificates.

Application by landlords to Local Authority for cancellation of certificates	4
Objections by tenants to cancellation of certificates ..	1
Decisions by Local Authority to cancel in spite of tenants' objection	Nil
Certificates cancelled by Local Authority	3

INSPECTION AND SUPERVISION OF FOOD

The number of inspections of food premises and the improvements recorded are shown in the following table :

	<i>Premises</i>				<i>Inspections</i>
Slaughterhouses	..	..	..	..	1,008
Bakehouses	..	..	..	..	58
Dairies and Milk Shops	..	..	..	..	127
Provision Shops	..	..	..	..	391
Fish Shops—Wet	..	..	..	..	61
Fish Shops—Fried	..	..	..	..	46
Butcher's Shops	..	..	..	..	228
Hotels and Restaurants	..	..	..	..	298
Canteens and Hospital Kitchens	..	..	..	..	87

Repairs or improvements carried out :

Constant hot water supply provided	..	..	..	..	14
Handbasins or sinks provided	..	..	..	..	15
Walls—Repaired, decorated or cleansed	..	..	..	..	57
Ceilings—Repaired, decorated or cleansed	..	..	..	..	45
Floors—New, repaired, decorated or cleansed	..	..	..	..	6
Water closets—New, repaired or cleansed	..	..	..	..	13
Water closets—" Wash your hands " notices	..	..	..	..	10
Refuse receptacles provided	..	..	..	..	4
Extract Fans	..	..	..	..	6
Refrigerators	...	...	...	...	3
Nailbrushes	..	..	..	..	9
First Aid Equipment	..	..	..	..	18
Miscellaneous	..	..	..	..	71

SLAUGHTERHOUSES

All animals slaughtered during the year at the four slaughterhouses in the Borough were examined for evidence of disease by the Public Health Inspectors.

Carcases and Offal Inspected and Condemned in whole or in part :

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known)	5,445	220	364	7,350	9,282	—
Number inspected ..	5,445	220	364	7,350	9,282	—
All diseases except Tuberculosis and Cysticerci :						
Whole carcasses condemned ..	—	3	—	6	5	—
Carcases of which some part or organ was condemned ..	931	39	4	26	190	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	17.09	19.09	1.10	0.43	2.10	—
Tuberculosis only :						
Whole carcasses condemned ..	—	—	—	—	—	—
Carcases of which some part or organ was condemned ..	—	—	—	—	62	—
Percentage of the number inspected affected with tuberculosis ..	—	—	—	—	0.66	—
Cysticercosis :						
Carcases of which some part or organ was condemned ..	1	—	—	—	—	—
Carcases submitted to treatment by refrigeration ..	1	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

Parts of Carcases or Organs Condemned

	Beasts including Cows	Calves	Sheep	Pigs	Total
Parts of Carcases	lb. 127	lb. 2	lb. 22	lb. 1,013	lb. 1,164
Organs	9,091	15	50	655	9,811

In addition to the above, 44 lb. of Salt Beef, 32 lb. of Imported Beef offal, 28 lb. of Imported Pork, 66 lb. of Imported Pork Offal and 13 lb. of Imported Mutton were condemned.

The total weight of meat condemned as unfit for human consumption was:

6 tons 5 cwts. 2 qrs. 0 lb.

Unsound meat was collected by a local firm engaged in the manufacture of commercial grease.

Other Food Inspection

<i>Type of Food</i>								<i>Weight in lb.</i>
Butter	..	..	..	..	..	..	..	12
Margarine	..	..	..	..	..	..	..	8
Lard	..	..	..	..	..	..	..	4
Cheese	..	..	..	..	..	..	..	3
Cooking Fat	..	..	..	..	..	..	..	9
Bacon	..	..	..	..	..	..	..	12
Ham	..	..	..	..	..	..	..	13
Sugar	..	..	..	..	..	..	..	8
Sausages	..	..	..	..	..	..	..	9
Liver Sausage	..	..	..	..	..	..	..	26
Polonies	..	..	..	;	..	..	..	24
Preserved Fruit	..	..	..	..	..	..	..	22
Conserves	..	..	..	..	..	..	..	14
Dehydrated Potatoes	..	..	..	..	..	..	..	50
Rice	..	..	..	..	..	..	..	57
Fish	..	..	..	..	..	..	..	791
Fish Cakes	..	..	..	..	..	..	..	7
Other Foods	..	..	..	..	..	..	..	29
								1,096

The total weight of meat and other foods listed above unfit for human food and condemned was:

6 tons 15 cwts. 1 qr. 4 lb.

In addition the following foods were condemned:

Tinned Milk	..	..	..	..	..	..	420 Tins
Other Tinned Goods	..	..	..	..	..	..	4,421 Tins
Packeted Foods	..	..	..	..	..	..	318 Pkts.
Bottled Foods	..	..	..	..	..	..	173 Bots.
Sponge Cakes	..	..	..	..	..	..	4
Crabs	..	..	..	..	..	..	40
Chickens	..	..	..	..	..	..	6

All condemned food other than unsound meat was destroyed by the Cleansing Department.

MILK AND DAIRIES (GENERAL) REGULATIONS, 1959

There are 2 dairies and 81 distributors on the register, and during the year 127 inspections of premises were made.

MILK (SPECIAL DESIGNATION) REGULATIONS, 1960

Licences issued for Sale of Graded Milk

Pasteurised	34
Tuberculin Tested	26
Pasteurised, Producer	2
Sterilised	50

Pasteurised and Sterilised Milk

During the year 136 samples of pasteurised milk and 7 samples of sterilised milk were submitted for examination. Two of the pasteurised samples failed to pass the Methylene Blue test. The milk from which these samples were obtained was pasteurised outside the Borough. The information was passed to the Public Health Inspector for the area concerned.

MILK—BIOLOGICAL TEST

Two samples of milk were submitted to the biological test for the presence of tubercle bacillus and both were negative.

LIQUID EGG

Except for one or two occasions, when operations were completed before the arrival of the Inspector, samples were taken on every day on which eggs were being broken-out at a local establishment. Altogether some one hundred and twenty samples were taken during the year of which ten were found to contain salmonella typhimurium and one salmonella menston. Arrangements were made for the pasteurisation of all liquid egg produced on days on which positive samples were found.

FOOD AND DRUGS ACT, 1955

Samples	No. of Samples	Samples below Standard	Nature of Deficiency
Milk	70		
Full Cream Milk, canned ..	1		
Peaches and Cream	1		
Cream, canned	2		
Butter	6		
Margarine	4		
Lard	3		
Currants	2		
Sultanas	2		
Mincemeat	3		
Ground Almonds	1		
Dates	1	1	See next page
Cream Cheese	1		
Flour	2		
Creamed Rice	2		
Sponge Mix	2		
Black Grapes	1		
Jam	4		
Lemon Curd	1		
Ice Cream	8		
Soft Drink	3		
Plums, canned	1		
Peas, canned	2		
Suet	1		
Bread Roll	1		
Soup	3		
Vinegar	2		
Sauce	1		
Tomato Ketchup	1		
Sausage Meat	1		
Pork Pie	1		
Minced Pork	1		
Curry Powder	2		
Gelatine	2		
Dried Brewer's Yeast ..	1		
Bloaters	1		
Fish Cakes	1		
Rum Butter Candy	1		
Buttered Assortment ..	1		
Buttered Mintoos	1		
Orange Juice	1	1	See next page
Biscuit Wafer	1		
Bottled Black Currants ..	1		
Chicken Fillets	1		
Chicken and Mushroom ..	1		
Potatoes	1		
	151	2	

OBSERVATIONS

Sample of Dates—A complaint was received concerning a packet of dates which smelt of paraffin. Investigations were made but no evidence was obtained as to how the contamination occurred.

Sample of Orange Juice—A bottle of orange juice was found on complaint to contain a slug and an insect. The Town Clerk communicated with the firm concerned.

LEGAL PROCEEDINGS

Proceedings were taken in the undermentioned cases:

Nature of Contravention	Result of proceedings
Sale of Pork Pies affected with mould	Fined £10 on one charge and £15 on a second charge.
Sale of Bread Roll containing a bandage	Fined £20.
Sale of an ice cream which contained a razor blade.	Fined £3.
Sale of cakes affected with mould.	Fined £10.
Sale of loaf of bread affected with mould.	Case dismissed.
Sale of loaf of bread containing two small pieces of rusty metal.	Fined £10.
Three open-topped paper bags containing bread rolls left by baker's roundsman on doorstep of cafe.	Roundsman fined £1.

Ice Cream (Heat Treatment, etc.) Regulations

Visits to premises where ice cream is manufactured or sold	377
Samples taken	54
Results of samples—Grade I	32
Grade II	14
Grade III	4
Grade IV	4

There are no ice cream manufacturers in the Borough.

STAFF

Delegated Health and Welfare Services BOROUGH OF COLCHESTER, 1961

1. Medical Officer of Health:
Dr. J. D. KERSHAW (Part Time)
2. Medical Officers:
Dr. R. E. BARRETT (Part-Time)
Dr. A. B. CLARK (Part-Time)
Dr. H. M. HARKNESS (Sessional)
Dr. G. HUGH-JONES (Sessional)
Dr. S. MACMILLAN (Sessional)
Dr. E. G. WILSON (Sessional)
3. Dental Officers
Mr. B. BENJAMIN (Sessional)
Mr. J. F. GODFREY (Part-Time)
Mr. S. G. WATSON (Sessional)
4. Administrative Staff:
 - (i) Chief Administrative Assistant:
Mr. H. T. PERCIVAL (Part-Time)
 - (ii) Administrative Assistants:
G. F. DUDLEY
D. R. FELGATE
B. C. BLOOMFIELD
Miss M. A. SHEPHERD } (Part-Time)
 - (iii) Clerical Assistants:
M. J. LAST
Miss A. M. PARSONS
Mrs. M. WORRICKER } (Part-Time)
 - (iv) Clerks:
1 Whole-Time Clerk (Welfare)
12 Part-Time Clerks
5. Superintendent Health Visitor:
Miss I. B. KNIGHT (Part-Time)

6. Non-Medical Supervisor of Midwives and Superintendent of Home Nurses:
Miss I. E. NICE (Part-Time)
7. Mental Welfare Officer:
Mr. I. T. HAZELL (Whole-Time)
8. Visitor for the Blind:
Miss C. M. BUTLER-KEARNEY (Whole-Time)
9. Visitor for the Physically Handicapped
Mr. W. G. HUNTER (Part-Time)
10. Matrons—Day Nurseries:
Miss E. M. CHAPMAN (Sheepen Rd. Day Nursery)
Mrs. E. A. SINGLETON (Brook St. Day Nursery)
11. Domestic Help Organiser:
Miss K. P. O'CALLAGHAN
12. Chiropodist:
Mrs. W. M. HAMILTON-CARLING (Whole-Time)
13. Health Visiting and Clinic Nursing Staff:
7 Health Visitors (Part-Time)
5 Clinic Nurses (Part-Time)
1 Tuberculosis Visitor (Whole-Time)
14. Midwifery and Home Nursing Staff:
1 District Midwife
9 Female Home Nurses
4 District Nurse Midwives
2 Male Home Nurses } (Whole-Time)

DELEGATED FUNCTIONS

ON 1st April, 1961, the Borough took over, under the Delegation Scheme, the administration of certain Health and Welfare Services. A summary of statistics regarding the operation of these services is presented in this report and gives some idea of the amount of work which is being undertaken. The statistics relate only to the nine months from April to December inclusive, and since, in previous years, Borough statistics for health and welfare were merged in those of the North-East Essex area or those of the County as a whole there are no available figures to compare them with. I shall not, therefore, make any comment on them this year, and my observations on delegated services as a whole will be brief. Nevertheless, a few comments are desirable.

General

As I have commented in previous reports, though Colchester is a separate unit for local government purposes, it cannot be entirely separated from the wider area of which it serves as the local focus. People who live outside the borough come into it to work, to shop and to seek recreation and entertainment and it is convenient and natural for them to look to it as the place where at any rate some of their social services should be provided. I have always considered it desirable that the personal health services of the borough should be co-ordinated with those of the North-East Essex Area and the agreement with the County Council by which the same directing staff should handle both borough and area administration seemed, in the circumstances, obvious. It has so far worked well in practice and should work even better as time goes on. It would have been too much to expect that there should be no "teething troubles" during these first months as we worked out practical techniques for solving administrative problems, but the fact that the work was being done by people who knew it and were accustomed to it certainly made the troubles lighter.

However, administrative co-ordination is not enough. There must be a generous spirit of give and take. Here the Borough and Port Health Committee, with the Council's approval, made it clear from the beginning that Colchester did not intend to be parochial. It has taken the line that a clinic situated within the borough should be open to all who found it convenient to attend there, no matter on which side of the boundary their homes were, and that staff employed by the Borough should not be precluded from giving services to the public living just outside it, if by so doing they could help people more effectively. The County Council and its officers have accepted this in a similar spirit and the consequent elasticity of services has made for humanity, efficiency and economy in practical working.

Clinic provision

For many years the various clinic services in the borough have been inadequately housed. The general school clinic is in cramped and make-shift quarters in Trinity Street, dental, ante-natal and child welfare clinics have been housed in the old gas cleansing station in Culver Street, speech therapy has wandered from one set of inadequate rented premises to another. As the town's population has built up round the outskirts, child welfare clinics have been set up in church halls and similar buildings, some of them tolerable for occasional work and some of them intolerable for any service of the kind. The only purpose-built clinic in the town is the one on the Shrub End Estate, opened in November 1958.

For a number of years the idea of a new central clinic has been in the air but there has been considerable difficulty in finding a suitable site. Expansion of the Culver Street clinic was planned

as apparently the only answer, but as the end of 1961 approached it was suggested that a site behind the Gate House, at the east end of High Street could be made available. The site is well situated, adequate in size and convenient to the omnibus station, which makes it accessible to people coming into the town from the countryside, and provisional plans have been drawn up for a building which will not only house a central clinic but will give the administrative and clerical staff new accommodation to replace what can only be described as their present "office slums."

Though the central clinic will contain a general purpose clinic suite to meet routine needs for the substantial number of people still living in the centre of the town, it is conceived principally as a centre for various kinds of specialist clinic work serving not only the town as a whole but a substantial surrounding area. Special provision will be made for health education, an increasingly important part of our work. And since no-one can accurately forecast the future of either local authority health services or the structure and needs of the population served, both clinic and office block are to be designed so that alteration and extension will be as easy as possible.

Proposals for clinics outside the centre are, necessarily, still very tentative. The Monkwick Estate, at present exceedingly ill-served in this respect, will, it is hoped, soon have a general purposes clinic similar to the one at Shrub End. The Greenstead Estate, when it has grown to its full size, is certain to need something of the same kind. Whether and when other parts of the town will come to need clinics it is impossible to say at present. In five years' time the position will probably be clearer; meanwhile it is important to do nothing which might prevent such building when the need comes and it is probably prudent to think long-term of two further clinics without being too specific about where they will stand and when they will be erected.

Mental Health

Up to April 1961, mental health work in Colchester was not merely no business of the Borough Council but was not even in the hands of an Area Committee, its administration being centralised in Chelmsford. Delegation, therefore, involved radical changes and the borough's administrative staff had no previous experience to guide them. It must be confessed that there were both mistakes and misunderstandings in the early months, but happily none of them were serious and I think it fair to say that things have now settled down fairly well.

The opportunities which arise for co-operation in community care in Colchester are substantial. Severalls Hospital, with its progressive outlook, is close at hand and even before delegation came into operation the area health department had been working toward closer liaison. More direct contact is now possible and the

mental welfare officers and health visitors go to the hospital regularly. Relations are closest in the geriatric field, a liaison committee having held several sessions. It is only by practice and experience that we shall eventually discover how best to bring together and make full use of the various workers who have something to contribute to the total, since the concept of community care for the mentally ill is something of a new one, but we seem to have made an encouraging start.

I should also make some reference to two developments which began during 1961 but will not come into full operation until later. One is the provision of a hostel on the Greenstead Estate for discharged patients who, while certainly well enough to leave hospital, need some stabilising care and support while they are finding their feet in the world outside. The other is the formation of the association known as "The Friends of Severalls Hospital". The key to success in community care lies in the better understanding by the public at large of the problems faced by the mentally ill and a public willingness to see and act on the precept that each of us must be his brother's keeper. From the start it was plain that there was a fund of goodwill which the association could mobilise, but it is also apparent that there is considerable public apprehension based on ignorance. Enlightened Friends of the Hospital are the best people to lighten such darkness.

The Physically Handicapped

Local Authority work for the blind, helped by the existence of a lively voluntary association, has been effective for some time, but has lacked really close liaison with the health visiting and other local health services; delegation is manifestly helping to produce that liaison. Work for other classes of the physically handicapped has lagged behind, mainly because of shortage of field staff.

The statistical tables show that the number of registered physically handicapped persons in the borough has increased by nearly one-third since delegation. This is partly due to the more intimate service which delegation makes possible and partly due to the fact that Colchester now has a part-time visiting officer. That officer is already overloaded and I hope that it will not be long before we have a whole-time worker. We undoubtedly need a centre for the physically handicapped and I am glad to be able to say that plans for one have already made substantial progress.

It might have been expected that the delegation of welfare work, a field of activity new to the health department staff, would have produced more teething troubles than any other part of the delegated services. In fact, the take-over problems have been comparatively trivial, thanks to the most helpful personal interest of Mr. W. E. Boyce, the County Welfare Officer.

Administration

The year has not been an easy one. Over and above the normal routine tasks, your officers have been required to work out the administrative problems of delegation in theory and then to make the theory serve in practice. There is no escaping the fact that delegation must involve some extra administrative work as a routine, while two new and substantial extra tasks have been undertaken in Welfare and Mental Health.

We are about to undertake a complete staff review and bring our administrative cadre up to the necessary strength, but in the meantime all the additional burden is being carried by our pre-existing staff with virtually no augmentation. The work has been done well and promptly but only at the cost of a good deal of stress and strain and a substantial amount of overwork and overtime which is not recorded in the books and receives no material recompense. That thoroughness, patience, pride in the job and a happy atmosphere have been maintained throughout is evidence that I am fortunate in my administrative colleagues. A particularly heavy load has fallen on the shoulders of Mr. Percival, the Chief Administrative Assistant, but he would be the first to agree that the success which has been achieved has been due to the right spirit throughout the department at all levels. Our colleagues in other departments have also been at pains to help us through the difficulties of the change-over, and we are grateful to them for this.

BOROUGH OF COLCHESTER DELEGATED HEALTH SERVICES

STATISTICS RELATING TO VARIOUS HEALTH SERVICES UNDER THE CONTROL OF THE HEALTH COMMITTEE FOR 1st APRIL TO 31st DECEMBER, 1961

Births and Baby Deaths:

Number of live births notified	895
Number of still births notified	14
Number of baby deaths notified (under 1 year) ..	17

Home Nursing and Midwifery:

Number of midwifery and maternity cases attended	234
Visits to these cases	7,235
Visits to other nursing cases	18,324

Child Welfare Clinics:

Number of sessions held	445
Number of children under 1 year first attending ..	634
Number of attendances made by children	14,996

Diphtheria Immunisation:

Number of children who completed course of immunisation	943
Number of children given a boosting dose	530

Whooping Cough Immunisation:

Number of children who completed course of immunisation	750
Number of children who received a reinforcing injection	112

Home Visits (Health Visitors)

Total visits	12,291
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Gas and Air Analgesia

Analgesics administered by County Council Midwives	204
Number of sets of apparatus in use	6

Antenatal and Postnatal Clinics:

Number of sessions	112
Antenatal cases first attending	258
Postnatal cases first attending	12
Attendances by Antenatal patients	1,278
Attendances by Postnatal patients	14

WELFARE OF THE PHYSICALLY HANDICAPPED REGISTER

Category of Case:	Cases	
	1:4:61	31:12:61
Amputees	3	5
Arthritis	10	17
Congenital malformations	1	1
Heart and circulatory system	4	9
Digestive and genito urinary system	1	1
Respiratory system	2	2
Skin diseases	1	1
Injuries of body and head	1	1
Injuries of limbs and spine	11	11
Ankylosing spondylitis	2	3
Epileptics	2	3
Plegics	5	9
Spastics	4	4
Sclerosis	18	16
Muscular dystrophy	2	3
Parkinson's disease	1	3
Poliomyelitis	4	4
Nervous and mental disorders	2	3
Diseases and injuries not specified above	1	2
	—	—
TOTAL	75	98
	—	—

WELFARE OF THE BLIND—REGISTER

Category of Case:	Cases	
	1:4:61	31:12:61
Blind	159	153
Partially Sighted	48	53
Defective Vision	15	18
TOTALS	222	224

DOMESTIC HELP SERVICE

1st April, 1961—31st December, 1961

Cases being helped at 31st March, 1961	40
New Cases helped 1st April, 1961—31st December, 1961	24
Cases being helped at 31st December, 1961	43
Hours of help provided	90,05

NIGHT ATTENDANCE SERVICE

1st April, 1961—31st December, 1961

Cases being attended at 31st March, 1961	NI
New Cases attended 1st April, 1961—31st December, 1961	3
Cases being helped at 31st December, 1961	
Hours of attendance provided	2,98

Vaccination against Smallpox:

Number of persons successfully vaccinated	63
Number of persons re-vaccinated	16

Vaccination against Poliomyelitis:

Number of persons receiving two injections	3,63
Number of persons receiving third injection	2,00
Number of children receiving fourth injection	4,15

Free Milk for T.B. Patients:

New Cases	
Total cases receiving milk at end of year	12

Sheepen Road Day Nursery:

Number of children on books at end of year	6
Total attendances	7,44

Brook Street Day Nursery:

Number of children on books at end of year	..	54
Total attendances		8,410

Chiropody Service:

Treatments given at home		743
Treatments given at clinics		1,217

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PUBLIC HEALTH DEPARTMENT,
TRINITY STREET.

